

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

ADDRESS (number and street)

7000 CARDINAL PLACE

☐Check if different  
than previously  
reported. (ACC)

DUBLIN

OH

43017

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00332833

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

06

01

2006

through

06

30

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JAMES W. HOEBERLING

Signature of Treasurer

Electronically Filed by JAMES W. HOEBERLING

Date

07

19

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		282080.14
(b) Cash on Hand at Beginning of Reporting Period .....	288070.36	
(c) Total Receipts (from Line 19) .....	13642.91	94133.13
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	301713.27	376213.27
7. Total Disbursements (from Line 31) .....	16000.00	90500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	285713.27	285713.27
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	9473.82	48848.27
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	3176.61	40402.83
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	12650.43	89251.10
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	12650.43	89251.10
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	992.48	4882.03
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	13642.91	94133.13
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	13642.91	94133.13

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		8500.00	63000.00
24. Independent Expenditure (use Schedule E) .....		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs) .....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		0.00	0.00
29. Other Disbursements.....		7500.00	27500.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....		0.00	0.00
(ii) "Levin" Share .....		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		16000.00	90500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		16000.00	90500.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	12650.43	89251.10
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12650.43	89251.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Brooke Alexy Mailing Address 15401 Oak Pond Lane City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Counsel, Asst General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 879.71		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74571 Amount of Each Receipt this Period 135.34 Receipt Payroll Deduction: (67.67- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) David Anderson Mailing Address 7977 Wingate Place City State Zip Code Delaware OH 43015 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Evp, Sales/mktg - Alt Care Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74437 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Charles Armstrong Mailing Address 3290 Santolina Dr City State Zip Code Las Vegas NV 89135 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Architect - Financial Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.56		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74455 Amount of Each Receipt this Period 20.88 Receipt Payroll Deduction: (20.88- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		196.22
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Charles Armstrong

Mailing Address 3290 Santolina Dr

City State Zip Code  
 Las Vegas NV 89135

FEC ID number of contributing federal political committee.

C

Name of Employer  
Cardinal Health, IncOccupation  
Architect - Financial Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.10

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 2 3 / 2 0 0 6

Transaction ID: 60719.C74772

Amount of Each Receipt this Period

21.54

Receipt

Payroll Deduction: (21.54-  
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Charles Artillio

Mailing Address 14 Teal Drive

City State Zip Code  
 Langhorne PA 19047

FEC ID number of contributing federal political committee.

C

Name of Employer  
Cardinal Health, IncOccupation  
Svp, Bus Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

745.76

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 0 9 / 2 0 0 6

Transaction ID: 60719.C74438

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (20.00-  
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Cassandra Baker

Mailing Address 1672 Barrington Rd

City State Zip Code  
 Upper Arlington OH 43221

FEC ID number of contributing federal political committee.

C

Name of Employer  
Cardinal Health, IncOccupation  
Dir, State Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.99

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 0 9 / 2 0 0 6

Transaction ID: 60719.C74521

Amount of Each Receipt this Period

88.46

Receipt

Payroll Deduction: (44.23-  
/Pay Period)

SUBTOTAL of Receipts This Page (optional) .....

150.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) James Barker Mailing Address 2761 Skelton Ln City Blacklick State OH Zip Code 43004 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Dir, Consumer Health Product Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 261.17		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74434 Amount of Each Receipt this Period 40.18 Receipt Payroll Deduction: (20.09- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Gregory Baumli Mailing Address 14566 Somerset Cir City Green Oaks State IL Zip Code 60048 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Manufacturing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 321.10		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74464 Amount of Each Receipt this Period 49.40 Receipt Payroll Deduction: (24.70- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Laurel Beeler Mailing Address 1723 Eagle Trl City Oxford State MI Zip Code 48371 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Dir, Reg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74465 Amount of Each Receipt this Period 50.00 Receipt Payroll Deduction: (25.00- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		139.58
<b>TOTAL</b> This Period (last page this line number only) .....		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) David Bergstrom Mailing Address 15 Kerby Lane City Mendham State NJ Zip Code 07945-2901 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Gm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 318.63			Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74461 Amount of Each Receipt this Period 49.02 Receipt Payroll Deduction: (24.51- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Bergstrom Mailing Address 7425 Vista Del Mar City La Jolla State CA Zip Code 92037 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Gm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00			Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74467 Amount of Each Receipt this Period 50.00 Receipt Payroll Deduction: (25.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Porter Bertelson Mailing Address 6895 Macneil Dr City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 452.79			Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74492 Amount of Each Receipt this Period 69.66 Receipt Payroll Deduction: (34.83- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			168.68
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Timothy Boes Mailing Address 103 La Trobe Ct City State Zip Code Southlake TX 76092 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Medication Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1085.63		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74584 Amount of Each Receipt this Period 167.02 Receipt Payroll Deduction: (83.51- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) William Bolding Mailing Address 1116 Keats Court City State Zip Code Lansdale PA 19446 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74451 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Scott Bostick Mailing Address 1546 Vivaldi Drive City State Zip Code Cardiff CA 92007 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Gm-supply Chain Solution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74517 Amount of Each Receipt this Period 80.00 Receipt Payroll Deduction: (40.00- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		287.02
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Anne Bouchenoire

Mailing Address 5772 Banavie Ct

City State Zip Code  
Dublin OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer  
Cardinal Health, IncOccupation  
Vp, Global Branding

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 6

Transaction ID: 60719.C74496

Amount of Each Receipt this Period

74.00

Receipt

Payroll Deduction: (37.00-  
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Mark Branday

Mailing Address 55 Island Blvd

City State Zip Code  
Fox Island WA 98333

FEC ID number of contributing federal political committee.

C

Name of Employer  
Cardinal Health, IncOccupation  
Vp, Corp Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.24

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 6

Transaction ID: 60719.C74481

Amount of Each Receipt this Period

58.96

Receipt

Payroll Deduction: (29.48-  
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Thomas Burke

Mailing Address 21 Parsons Drive

City State Zip Code  
Swampscott MA 01907

FEC ID number of contributing federal political committee.

C

Name of Employer  
Cardinal Health, IncOccupation  
Pres, Northeast Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.79

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 6

Transaction ID: 60719.C74408

Amount of Each Receipt this Period

39.66

Receipt

Payroll Deduction: (19.83-  
/Pay Period)

SUBTOTAL of Receipts This Page (optional) .....

172.62

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Gary Cacciatore Mailing Address 3810 Loch Glen Court City Houston State TX Zip Code 77059 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Dir, Affairs - Counsel-regltry Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 365.17		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60719.C74479 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">56.18</td> </tr> </table> Receipt Payroll Deduction: (28.09- /Pay Period )	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	0	6	56.18									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	6		0	9		2	0	0	6																							
56.18																																
<b>B.</b> Full Name (Last, First, Middle Initial) Thomas Calhoun Mailing Address 5n496 W Lakeview Cir City St Charles State IL Zip Code 60175 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Pharma Dist Group Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 351.91		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60719.C74476 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">54.14</td> </tr> </table> Receipt Payroll Deduction: (27.07- /Pay Period )	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	0	6	54.14									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	6		0	9		2	0	0	6																							
54.14																																
<b>C.</b> Full Name (Last, First, Middle Initial) David Canniff Mailing Address 1674 Kindra Court City Brentwood State TN Zip Code 37027 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Gm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60719.C74435 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">40.00</td> </tr> </table> Receipt Payroll Deduction: (20.00- /Pay Period )	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	0	6	40.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	6		0	9		2	0	0	6																							
40.00																																
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<table border="1"> <tr> <td colspan="10">150.32</td> </tr> </table>	150.32																													
150.32																																
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																														

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Debra Caravelli Mailing Address 4862 Vista Ridge Dr City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Hr Service Deliv/vend Mgm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 257.35		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74453 Amount of Each Receipt this Period 40.38 Receipt Payroll Deduction: (20.19- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Nicole Cardosa Mailing Address 3248 Brant Street City State Zip Code San Diego CA 92103 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Dir, Sales - Regional Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74449 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Douglas Cones Mailing Address 4826 Macallan Court West City State Zip Code Dublin OH 43017-8269 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 233.74		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74403 Amount of Each Receipt this Period 35.96 Receipt Payroll Deduction: (17.98- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		116.34
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Mary Cooney		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 5151 Edloe # 13207		<b>Transaction ID:</b> 60719.C74557
City Houston	State TX	Zip Code 77005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 101.50
Name of Employer Cardinal Health, Inc	Occupation Svp, Hr Business Partner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 659.75	Payroll Deduction: (50.75- /Pay Period )

<b>B.</b> Full Name (Last, First, Middle Initial) Bonita Court		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1306 Downs Parkway		<b>Transaction ID:</b> 60719.C74457
City Libertyville	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 43.04
Name of Employer Cardinal Health, Inc	Occupation Sr Mgr, Sls & Mktg	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.36	Payroll Deduction: (21.52- /Pay Period )

<b>C.</b> Full Name (Last, First, Middle Initial) Jody Davids		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 7638 Red Bay Court		<b>Transaction ID:</b> 60719.C74555
City Dublin	State OH	Zip Code 43016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Cardinal Health, Inc	Occupation Evp, Cio	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	Payroll Deduction: (50.00- /Pay Period )

SUBTOTAL of Receipts This Page (optional) .....

244.54

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Ronald Dedels Mailing Address 4840 Paddington Way City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Sales Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 201.89			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74395 Amount of Each Receipt this Period 31.06 Receipt Payroll Deduction: (15.53- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Ted Dibiase Mailing Address 4949 Chaddington Dr City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Advice & Counsel Ctr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 767.26			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74560 Amount of Each Receipt this Period 118.04 Receipt Payroll Deduction: (59.02- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Scott Dodson Mailing Address 7000 Grate Park Dr City State Zip Code New Albany OH 43054 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Controller, Nlc Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 246.55			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74406 Amount of Each Receipt this Period 38.50 Receipt Payroll Deduction: (19.25- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			187.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Gary Dolch Mailing Address 8382 Deep Run City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Evp, Quality Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 487.50		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74497 Amount of Each Receipt this Period 75.00 Receipt Payroll Deduction: (37.50- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) James Egan Mailing Address 4650 Aberdeen Ave City State Zip Code Dublin OH 43016 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Enterprise It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 333.84		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74471 Amount of Each Receipt this Period 51.36 Receipt Payroll Deduction: (25.68- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Eric Ellingson Mailing Address 1308 Dancer Ct City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Dir, R&D Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 339.95		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74473 Amount of Each Receipt this Period 52.30 Receipt Payroll Deduction: (26.15- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		178.66
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

**A.** Sue Ellen EricksonMailing Address 21 Springfield  
1aCity State Zip Code  
Cranford NJ 07016FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Cardinal Health, IncOccupation  
Mgr li, Service

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.71

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	0	6

Transaction ID: 60719.C74396

Amount of Each Receipt this Period

31.34

Receipt

Payroll Deduction: (15.67-  
/Pay Period )

Full Name (Last, First, Middle Initial)

**B.** Jo Anne Fasetti

Mailing Address 1163 Vineyard Dr

City State Zip Code  
Gurnee IL 60031FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Cardinal Health, IncOccupation  
Svp, Hr Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	0	6

Transaction ID: 60719.C74522

Amount of Each Receipt this Period

89.56

Receipt

Payroll Deduction: (44.78-  
/Pay Period )

Full Name (Last, First, Middle Initial)

**C.** Eric Feltes

Mailing Address 718 Woodridge Trail

City State Zip Code  
Mchenry IL 60050FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Cardinal Health, IncOccupation  
Mgr, Business Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	0	6

Transaction ID: 60719.C74458

Amount of Each Receipt this Period

44.00

Receipt

Payroll Deduction: (22.00-  
/Pay Period )

SUBTOTAL of Receipts This Page (optional) .....

164.90

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 51

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Nathaniel Filler Mailing Address 777 Military Drive City State Zip Code Galloway OH 43119 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Mgr, Gov&apos;t Relations - St Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.06			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74407 Amount of Each Receipt this Period 39.24 Receipt Payroll Deduction: (19.62- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Karen Flynn Mailing Address 205 Rising Hill Ln City State Zip Code Chester Springs PA 19425 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Global Accounts Dir Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74442 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Brendan Ford Mailing Address 798 Tweed Court City State Zip Code Worthington OH 43085 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Evp, Corp Dev Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74350 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0- 0/Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			279.24
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Shawn Gallagher Mailing Address 9501 Bartons Creekrd City State Zip Code Raleigh NC 27615 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp/gm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74448 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Giacalone Mailing Address 7471 Balfoure Circle City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Reg Affairs/chf Reg Cnsl Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 501.28		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74499 Amount of Each Receipt this Period 77.12 Receipt Payroll Deduction: (38.56- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Robert Glover Mailing Address 5633 N Kostner Ave City State Zip Code Chicago IL 60646 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Hlth Sys Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 339.69		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74472 Amount of Each Receipt this Period 52.26 Receipt Payroll Deduction: (26.13- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		169.38
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) David Goldsberry Mailing Address 321 St Andrews Ln City Gurnee State IL Zip Code 60031 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Ips Govt Sls & Ops Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 219.05			Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74401 Amount of Each Receipt this Period 33.70 Receipt Payroll Deduction: (16.85- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Theresa Gould Mailing Address 3418 Big Hickory Dr. City Kingwood State TX Zip Code 77345 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Hr Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 205.57			Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74398 Amount of Each Receipt this Period 32.12 Receipt Payroll Deduction: (16.06- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Michael Groesbeck Mailing Address 33916 Summerfield City Gurnee State IL Zip Code 60031 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Qra Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 220.95			Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74404 Amount of Each Receipt this Period 36.54 Receipt Payroll Deduction: (18.27- /Pay Period )

SUBTOTAL of Receipts This Page (optional) .....

102.36

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Debra Hadley Mailing Address 2698 Berwyn Road City Columbus State OH Zip Code 43221 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Dir, Community Aff/ Contribute Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74487 Amount of Each Receipt this Period 60.00 Receipt Payroll Deduction: (30.00- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) L Glenn Hall Mailing Address 12320 Alameda Trace Circle #1502 City Austin State TX Zip Code 78727 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Gm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 380.38		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74480 Amount of Each Receipt this Period 58.52 Receipt Payroll Deduction: (29.26- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Troy Hanson Mailing Address 5622 Dorsey Drive City Columbus State OH Zip Code 43235 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Dir, Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 288.86		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74459 Amount of Each Receipt this Period 44.44 Receipt Payroll Deduction: (22.22- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		162.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 51

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Mark Hartman Mailing Address 7677 Tartan Fields Dr City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Evp, Corp Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1153.10		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74587 Amount of Each Receipt this Period 177.40 Receipt Payroll Deduction: (88.70- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Linda Harty Mailing Address 1761 Roxbury Rd City State Zip Code Columbus OH 43212 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Treasurer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1344.85		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74352 Amount of Each Receipt this Period 206.90 Receipt Payroll Deduction: (103.4- 5/Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Richard Heard Mailing Address 415 Misty Manor City State Zip Code Houston TX 77094 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Corp Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74466 Amount of Each Receipt this Period 50.00 Receipt Payroll Deduction: (25.00- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		434.30
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 51

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) James Hethcox Mailing Address 5442 Haverhill Drive City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Ctr Med Safe/clin Imprv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 424.97		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74490 Amount of Each Receipt this Period 65.38 Receipt Payroll Deduction: (32.69- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Deborah Hide Mailing Address 7529 Delmar City State Zip Code St Louis MO 63130 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Dir, Retail Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74762 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Robin Hoke Mailing Address 2134 Yorkshire Road City State Zip Code Columbus OH 43221 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Strategic Initiatives Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 512.52		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74500 Amount of Each Receipt this Period 79.12 Receipt Payroll Deduction: (39.56- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		164.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Stephen Inacker Mailing Address 1490 S Ridge Rd City Lake Forest State IL Zip Code 60045 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Pres, Hosp Supply Dist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 327.34		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60719.C74469 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">50.36</td> </tr> </table> Receipt Payroll Deduction: (25.18- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	0	6	50.36									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	6		0	9		2	0	0	6																							
50.36																																
<b>B.</b> Full Name (Last, First, Middle Initial) Brian Jackson Mailing Address 9055 Tartan Flds Dr City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Ips Sales Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 208.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60719.C74399 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">32.00</td> </tr> </table> Receipt Payroll Deduction: (16.00- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	0	6	32.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	6		0	9		2	0	0	6																							
32.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) Renard Jackson Mailing Address 744 Tennis Ave City Ambler State PA Zip Code 19002 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Evp, Packaging - Contract Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 261.17		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60719.C74433 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">40.18</td> </tr> </table> Receipt Payroll Deduction: (20.09- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	0	6	40.18									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	6		0	9		2	0	0	6																							
40.18																																
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<table border="1"> <tr> <td>122.54</td> </tr> </table>	122.54																													
122.54																																
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																														



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 51

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Stephen Johnson Mailing Address 360 Ormond St Se City Atlanta State GA Zip Code 30315 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Distribution Srvc Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 341.38		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74474 Amount of Each Receipt this Period 52.52 Receipt Payroll Deduction: (26.26- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Remi Kajogbola Mailing Address 15751 Sheridan St #149 City Fort Lauderdale State FL Zip Code 33331 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Rvp, Corporate Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 648.31		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74525 Amount of Each Receipt this Period 99.74 Receipt Payroll Deduction: (49.87- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Michael Kennedy Mailing Address 4783 Vista Ridge Dr City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp & General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 362.31		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74478 Amount of Each Receipt this Period 55.74 Receipt Payroll Deduction: (27.87- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		208.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 51

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Lisa Kirsh Mailing Address 2508 Bayview Dr City Nashville State TN Zip Code 37217 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Dir, Purchasing - Strategic Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74441 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Kopp Mailing Address 4050 Whispering Pines Court City Suwanee State GA Zip Code 30024 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Business Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 329.94		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74470 Amount of Each Receipt this Period 50.76 Receipt Payroll Deduction: (25.38- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph Kubicek Mailing Address 443 Douglas City Lake Forest State IL Zip Code 60045 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 316.89		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74462 Amount of Each Receipt this Period 49.18 Receipt Payroll Deduction: (24.59- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		139.94
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 27 / 51

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Ronald Labrum Mailing Address 1325 Canterbury Cir City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Chmn/ceo, Supply Chain Svcs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1508.00			Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74362 Amount of Each Receipt this Period 232.00 Receipt Payroll Deduction: (116.0-0/Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Frank Lafasto Mailing Address 1451 S Kurtis Lane City State Zip Code Lake Forest IL 60045 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Org Effectiveness Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1599.52			Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74369 Amount of Each Receipt this Period 246.08 Receipt Payroll Deduction: (123.0-4/Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Clay Lassiter Mailing Address 2023 Cannonbury Lane City State Zip Code Richmond TX 77469 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 282.21			Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74460 Amount of Each Receipt this Period 24.12 Receipt Payroll Deduction: (24.12-/Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			502.20
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 51

(check only one)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Clay Lassiter		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 2023 Cannonbury Lane		<b>Transaction ID:</b> 60719.C74773
City Richmond	State TX	Zip Code 77469
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.71
Name of Employer Cardinal Health, Inc	Occupation Vp, Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 303.92	
		Receipt Payroll Deduction: (21.71- /Pay Period )

<b>B.</b> Full Name (Last, First, Middle Initial) Steve Lawrence		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 4868 Carrigan Ridge		<b>Transaction ID:</b> 60719.C74524
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 99.66
Name of Employer Cardinal Health, Inc	Occupation Svp, Retail Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 647.79	
		Receipt Payroll Deduction: (49.83- /Pay Period )

<b>C.</b> Full Name (Last, First, Middle Initial) James Leidl		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 95 Arboretum Dr		<b>Transaction ID:</b> 60719.C74397
City North Barrington	State IL	Zip Code 60010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.99
Name of Employer Cardinal Health, Inc	Occupation Vp/gm, V Mueller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 191.88	
		Receipt Payroll Deduction: (15.99- /Pay Period )

**SUBTOTAL** of Receipts This Page (optional) .....

137.36

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 51

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) James Leidl Mailing Address 95 Arboretum Dr City North Barrington State IL Zip Code 60010 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp/gm, V Mueller Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 211.59		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74723 Amount of Each Receipt this Period 19.71 Receipt Payroll Deduction: (19.71- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Lynch Mailing Address 550 E Rosemary City Lake Forest State IL Zip Code 60045 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Group Pres, Mfg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1940.64		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74383 Amount of Each Receipt this Period 298.56 Receipt Payroll Deduction: (149.2- 8/Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Donna Mann Mailing Address 6666 Mcvey Blvd City West Worthington State OH Zip Code 43235 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Dir, Hr Svc Delivery/transform Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 262.98		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74456 Amount of Each Receipt this Period 42.30 Receipt Payroll Deduction: (21.15- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		360.57
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 51

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Samuel Manzanares Mailing Address 1205 Brown Ridge City State Zip Code El Paso TX 79912 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Qlty Ops Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 663.85			Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74559 Amount of Each Receipt this Period 107.70 Receipt Payroll Deduction: (53.85- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Robin Martial Mailing Address 1741 Haggin Grove W City State Zip Code Carmichael CA 95608 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Evp, Sales & Mktg- Hlth Sy Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74450 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Janice Mccampbell Mailing Address 8001 Millenium Drive City State Zip Code Raleigh NC 27614 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Dir, Engineering - Disposables Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 320.51			Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74477 Amount of Each Receipt this Period 55.26 Receipt Payroll Deduction: (27.63- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			202.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 51

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Lindy Mclean Mailing Address 7272 Black Abbey Ct City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Mgr, Key Account Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 398.32			Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74489 Amount of Each Receipt this Period 61.28 Receipt Payroll Deduction: (30.64- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Bruce Mcwhinney Mailing Address 205 Presque Isle Ln City State Zip Code Chapel Hill NC 27514 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Center Med Safe/cln Imprv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74440 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Jose Mejorado Mailing Address 7656 Dianjou Dr. City State Zip Code El Paso TX 79912 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Mfg Convertors Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 386.88			Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74482 Amount of Each Receipt this Period 59.52 Receipt Payroll Deduction: (29.76- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			160.80
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 51

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Mark Mitchell Mailing Address 6604 Cresent Lake Dr City Lakeland State FL Zip Code 33813 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Health Systems - Group Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.62		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74491 Amount of Each Receipt this Period 65.48 Receipt Payroll Deduction: (32.74- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Myers Mailing Address Po Box 230 Cardinal (mps) Expat City Waukegan State IL Zip Code 60079 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Gmd & amp; Ceo, Singapore Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1258.66		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74592 Amount of Each Receipt this Period 193.64 Receipt Payroll Deduction: (96.82- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Frederick Nelson Mailing Address 7303 Deacon Court City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Integrated Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 468.13		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74494 Amount of Each Receipt this Period 72.02 Receipt Payroll Deduction: (36.01- /Pay Period )

**SUBTOTAL** of Receipts This Page (optional) .....

**331.14**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 51

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Michael Orscheln Mailing Address 601 Buckingham Pl City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp/gm, Ambulatory Care Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74447 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Mark Overman Mailing Address 900 Wyndham Hill Ct City State Zip Code Southlake TX 76092 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Hlth Sys Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 201.89			Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74394 Amount of Each Receipt this Period 31.06 Receipt Payroll Deduction: (15.53- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) William Owad Mailing Address 7558 Heatherwood Ln City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Operational Excellence Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1012.44			Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74575 Amount of Each Receipt this Period 155.76 Receipt Payroll Deduction: (77.88- /Pay Period )

SUBTOTAL of Receipts This Page (optional) .....

226.82

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 51

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Joseph Papa Mailing Address One Deerhill Rd City State Zip Code Chester NJ 07930 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Chairman/ceo, Pts Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1400.49		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74353 Amount of Each Receipt this Period 215.46 Receipt Payroll Deduction: (107.7- 3/Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Thomas Perrine Mailing Address 7249 Landon Lane City State Zip Code New Albany OH 43054 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Enterprise It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74444 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Kevin Peters Mailing Address 465 Fourth Fairway Drive City State Zip Code Roswell GA 30076 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Corp Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 621.66		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74523 Amount of Each Receipt this Period 95.64 Receipt Payroll Deduction: (47.82- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		351.10
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 51

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) William Peters Mailing Address 1532 Lost Lake Drive Drive City State Zip Code Keller TX 76248 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Rvp, Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 231.27		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74402 Amount of Each Receipt this Period 35.58 Receipt Payroll Deduction: (17.79- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) George Plava Mailing Address 3526 Pembroke Dr City State Zip Code Richmond TX 77469 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Pres, Pharmacy Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 855.40		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74570 Amount of Each Receipt this Period 131.60 Receipt Payroll Deduction: (65.80- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Kathy Popejoy Mailing Address 11127 W 59th Ave City State Zip Code Arvada CO 80004 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Mgr, Region Ops B Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.91		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74432 Amount of Each Receipt this Period 40.14 Receipt Payroll Deduction: (20.07- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		207.32
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 51

(check only one)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) William Rampy Mailing Address 103 Foxglove Ln City State Zip Code Bentonville AR 72712 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Franchise Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 454.32		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74556 Amount of Each Receipt this Period 100.96 Receipt Payroll Deduction: (50.48- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Stephen Reardon Mailing Address 5078 Breckenhurst Dr City State Zip Code Hilliard OH 43026 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Quality Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74436 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Cynthia Rhomberg Mailing Address 9379 Redan Court City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Corp Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74443 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		180.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 51

(check only one)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Sandra Rigopoulos

Mailing Address 307 S Hi Lusi Ave

City

Mt Prospect

State

IL

Zip Code

60056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cardinal Health, Inc

Occupation

Vp, Vendor Mgmt &amp; Admin

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1080.30

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 6

Transaction ID: 60719.C74583

Amount of Each Receipt this Period

166.20

Receipt

Payroll Deduction: (83.10-  
/Pay Period )

Full Name (Last, First, Middle Initial)

B. Mark Rosenbaum

Mailing Address 6565 Lockhart Lane

City

Dublin

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cardinal Health, Inc

Occupation

Pres, Ips Sales

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1863.03

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 6

Transaction ID: 60719.C74382

Amount of Each Receipt this Period

286.62

Receipt

Payroll Deduction: (143.3-  
1/Pay Period )

Full Name (Last, First, Middle Initial)

C. Claudia Russell

Mailing Address 5064 Seagrove Cove

City

San Diego

State

CA

Zip Code

92130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cardinal Health, Inc

Occupation

Vp, Mktg - Strategic

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

510.87

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 6

Transaction ID: 60719.C74520

Amount of Each Receipt this Period

81.74

Receipt

Payroll Deduction: (40.87-  
/Pay Period )

SUBTOTAL of Receipts This Page (optional) .....

534.56

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 51

(check only one)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) James Saponaro Mailing Address 9392 Redan Court City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Business Units- Retail Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1125.54		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74586 Amount of Each Receipt this Period 173.16 Receipt Payroll Deduction: (86.58- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Richard Schindewolf Mailing Address 6507 Burning Tree City State Zip Code Mchenry IL 60050 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Gm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74488 Amount of Each Receipt this Period 60.00 Receipt Payroll Deduction: (30.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) David Schlotterbeck Mailing Address 12 Hermitage Lane City State Zip Code Laguna Niguel CA 92677 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Pres/ceo Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74351 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0- 0/Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		433.16
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 51

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Douglas Schmidt Mailing Address 31145 Reigate Ln City State Zip Code Green Oaks IL 60048 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Neuro/spine & Int's Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 201.11		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74393 Amount of Each Receipt this Period 30.94 Receipt Payroll Deduction: (15.47- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Scrase Mailing Address 8358 Davington City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Dir, Vendor Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 344.76		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74475 Amount of Each Receipt this Period 53.04 Receipt Payroll Deduction: (26.52- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Frank Segrave Mailing Address 5371 Gordon Way City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Purchasing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74446 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		123.98
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 51

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Kendell Sherrer Mailing Address 7720 Heatherwood Ln City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Hr Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 261.43		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74452 Amount of Each Receipt this Period 40.22 Receipt Payroll Deduction: (20.11- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Jesse Sims Mailing Address 11014 Black Falls Ct City State Zip Code Sugar Land TX 77478 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Mgr, Service - Technical Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74554 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Jake St. Philip Mailing Address 4727 Plummer Court City State Zip Code San Diego CA 92130 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Pres, Alaris Products Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74445 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		180.22
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Cornell Stamoran Mailing Address 3 Matrick Court City Hillsborough State NJ Zip Code 08844 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Strategic Intel & Plan Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 840.06			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74569 Amount of Each Receipt this Period 129.24 Receipt Payroll Deduction: (64.62- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Mark Stauffer Mailing Address 10644 Dundee Ct City Powell State OH Zip Code 43065 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Audit Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 667.68			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74558 Amount of Each Receipt this Period 102.72 Receipt Payroll Deduction: (51.36- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Meriann Stockwell Mailing Address 105 16th Street City Belleair Beach State FL Zip Code 33786 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Dir, Gbl Strat Procurement Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 249.34			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74405 Amount of Each Receipt this Period 38.36 Receipt Payroll Deduction: (19.18- /Pay Period )

SUBTOTAL of Receipts This Page (optional) .....

270.32

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Greg Storm Mailing Address 7703 E 85th St City State Zip Code Tulsa OK 74133 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Mgr, Proc Supply Chain Solutns Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 251.50		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74366 Amount of Each Receipt this Period 25.38 Receipt Payroll Deduction: (12.69- /Pay Period)
<b>B.</b> Full Name (Last, First, Middle Initial) Greg Storm Mailing Address 7703 E 85th St City State Zip Code Tulsa OK 74133 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Mgr, Proc Supply Chain Solutns Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 262.21		Date of Receipt MM / DD / YYYY 06 / 23 / 2006 <b>Transaction ID:</b> 60719.C74663 Amount of Each Receipt this Period 10.71 Receipt Payroll Deduction: (10.71- /Pay Period)
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph Strack Mailing Address 29420 Cambridge Ct City State Zip Code Agoura Hills CA 91301 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Rvp, Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 481.00		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60719.C74495 Amount of Each Receipt this Period 74.00 Receipt Payroll Deduction: (37.00- /Pay Period)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		110.09
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Thomas Stuart Mailing Address 2 Jonah Ct Po Box 615 City Peapack State NJ Zip Code 07977 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Pres, Oral Technologies Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 455.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> 60719.C74493 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">70.00</td> </tr> </table> Receipt Payroll Deduction: (35.00- /Pay Period )	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	0	6	70.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	6		0	9		2	0	0	6																							
70.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Summers Mailing Address 146 Chasely Circle City Powell State OH Zip Code 43065 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Sales - Healthsystems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 320.06		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> 60719.C74463 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">49.24</td> </tr> </table> Receipt Payroll Deduction: (24.62- /Pay Period )	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	0	6	49.24									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	6		0	9		2	0	0	6																							
49.24																																
<b>C.</b> Full Name (Last, First, Middle Initial) Mary Jane Tew Mailing Address 6315 Duffy Rd City Delaware State OH Zip Code 43015 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Sales - Admin Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> 60719.C74468 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table> Receipt Payroll Deduction: (25.00- /Pay Period )	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	0	6	50.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	6		0	9		2	0	0	6																							
50.00																																
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		<table border="1"> <tr> <td colspan="10">169.24</td> </tr> </table>	169.24																													
169.24																																
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																														

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Ethan Trull		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 2663 Marl Oak Dr		<b>Transaction ID:</b> 60719.C74400
City Highland Park	State IL	Zip Code 60035
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.48
Name of Employer Cardinal Health, Inc	Occupation Counsel, Asst General	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.12	Payroll Deduction: (16.24- /Pay Period )

<b>B.</b> Full Name (Last, First, Middle Initial) Richard Walsh		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 8722 Sweetwater Ct		<b>Transaction ID:</b> 60719.C74498
City Powell	State OH	Zip Code 43065
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.12
Name of Employer Cardinal Health, Inc	Occupation Vp, Flight Ops/bus Cont	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.78	Payroll Deduction: (38.06- /Pay Period )

<b>C.</b> Full Name (Last, First, Middle Initial) Robert Walter		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address C/o Cardinal Health 7000 Cardinal Place		<b>Transaction ID:</b> 60719.C74409
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 384.04
Name of Employer Cardinal Health, Inc	Occupation Chairman	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.26	Payroll Deduction: (192.0- 2/Pay Period )

SUBTOTAL of Receipts This Page (optional) .....

492.64

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Carole Watkins Mailing Address 1967 Woodlands Place City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Evp, Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74518 Amount of Each Receipt this Period 80.00 Receipt Payroll Deduction: (40.00- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Curt Witte Mailing Address 6724 Perimeter Loop Rd #232 City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Mktg - Alt Care Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1113.32		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74585 Amount of Each Receipt this Period 171.28 Receipt Payroll Deduction: (85.64- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Deborah Wolin Mailing Address 44 Lake Mist Drive City State Zip Code Sugar Land TX 77479 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Counsel, Sr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> 60719.C74439 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		291.28
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Connie Woodburn			Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 9761 Erin Woods Dr			<b>Transaction ID:</b> 60719.C74370	
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 246.82	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Svp, Prof & Gov't Rel	Payroll Deduction: (123.4- 1/Pay Period )	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1604.33		
<b>B.</b> Full Name (Last, First, Middle Initial) James Worley			Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 9 Whitewood Circle			<b>Transaction ID:</b> 60719.C74454	
City Amesbury	State MA	Zip Code 01913	Amount of Each Receipt this Period 20.58	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Rvp, Distribution	Payroll Deduction: (20.58- /Pay Period )	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 246.96		

SUBTOTAL of Receipts This Page (optional) .....

267.40

TOTAL This Period (last page this line number only) .....

9473.82

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 51

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

**A.**

Full Name (Last, First, Middle Initial)

Comerica Bank

Mailing Address Po Box 75000 (mc 2250)

City

Detroit

State

MI

Zip Code

48275-2250

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Bank

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

4882.03

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 1 / 2 0 0 6

Transaction ID: 60607.C73958

Amount of Each Receipt this Period

992.48

Interest Received

**SUBTOTAL** of Receipts This Page (optional) .....

992.48

**TOTAL** This Period (last page this line number only) .....

992.48

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 48 / 51

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

**A.** Wilson-New Mexico Victory Committee

Mailing Address P.O. Box 10470

City Albuquerque State NM Zip Code 87191-

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

ANNUAL/OTHER

Transaction ID: 60719.E745

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B.** ERIC PAC

Mailing Address 209 Pennsylvania Avenue, SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

ANNUAL/OTHER

Transaction ID: 60719.E750

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C.** PAUL PAC

Mailing Address P.O. Box 4508

City Arlington State VA Zip Code 22204-

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

ANNUAL/OTHER

Transaction ID: 60719.E751

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

DIRECT CONTRIBUTION

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 49 / 51

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

**A.** Nathan Deal for Congress

Mailing Address P.O. Box 16021

City Alexandria State VA Zip Code 22302-

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name  
NATHAN DEAL

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: GA District: 9

Transaction ID: 60719.E746

Date of Disbursement

06 / 13 / 2006

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B.** Committee to Re-Elect Bobby Jindal

Mailing Address P.O. Box 8628

City Metairie State LA Zip Code 70011-

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name  
BOBBY JINDAL

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 01

Transaction ID: 60719.E752

Date of Disbursement

06 / 28 / 2006

Amount of Each Disbursement this Period

2000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C.** The Ramstad Volunteer Committee

Mailing Address 1809 Plymouth Road  
Suite 310B

City Minnetonka State MN Zip Code 55305-

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name  
JIM RAMSTAD

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN District: 03

Transaction ID: 60719.E749

Date of Disbursement

06 / 22 / 2006

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

**SUBTOTAL** of Disbursements This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

8500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 / 51

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

**A.** Ohio Senate Democrats

Mailing Address 271 East State Street

City Columbus State OH Zip Code 43215-

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

ANNUAL/OTHER

Transaction ID: 60719.E744

Date of Disbursement

06 / 08 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.** Citizens for Austria

Mailing Address 2537 Obetz Drive

City Dayton State OH Zip Code 45434-

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60607.E742

Date of Disbursement

06 / 02 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Citizens for Dewine

Mailing Address 506 Crisp Wind Court

City Fairborn State OH Zip Code 45324-

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E747

Date of Disbursement

06 / 22 / 2006

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 51 / 51

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

**A. Husted for Ohio**

Mailing Address 148 Sherbrooke Drive

City  
DaytonState  
OHZip Code  
45429-Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E748

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	0	6

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Zurz Campaign Committee**

Mailing Address 3773 Muirfield Drive

City  
UniontownState  
OHZip Code  
44685-Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E743

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	0	6

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

3500.00

TOTAL This Period (last page this line number only) .....

7500.00